

## PART B - FEE(S) TRANSMITTAL

6-27-06  
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JUN 26 2006

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051414 7590 04/28/2006

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

William R. Haulbrook	(Depositor's name)
<i>William R. Haulbrook</i>	(Signature)
June 26, 2006	(Date)

GOODWIN PROCTER LLP  
PATENT ADMINISTRATOR  
EXCHANGE PLACE  
BOSTON, MA 02109-2881

06/29/2006 SHASSEN2 00000165 10650155

01 FC:2501 700.00 OP  
02 FC:1504 300.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/650,155	08/28/2003	William A. Goodwin	SNS-010C1	7079

TITLE OF INVENTION: 3-D SELECTION AND MANIPULATION WITH A MULTIPLE DIMENSION HAPTIC INTERFACE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	07/28/2006
EXAMINER	ART UNIT		CLASS-SUBCLASS		
BUI, BRYAN	2863		702-152000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Goodwin Procter LLP

2 \_\_\_\_\_

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SensAble Technologies, Inc.

Woburn, Massachusetts

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

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Issue Fee  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies \_\_\_\_\_

A check in the amount of the fee(s) is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 07-1700 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*William R. Haulbrook*

Date June 26, 2006

Typed or printed name William R. Haulbrook

Registration No. 53,002

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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**TRANSMITTAL  
FORM**

U.S. Express Mail Mailing Label No. EQ 693279635 US

<b>TRANSMITTAL FORM</b>	Application Serial Number	10/650,155
	Filing Date	August 28, 2003
	First Named Inventor	Goodwin
	Group Art Unit	2863
	Examiner Name	Bui, Bryan
	Attorney Docket No.	SNS-010C1
	Patent No.	Not applicable
	Issue Date	Not applicable

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <li><input type="checkbox"/> Check Attached</li> <li><input type="checkbox"/> Copy of Fee Transmittal Form</li> </ul>	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal Drawing(s)</li> </ul>	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <ul style="list-style-type: none"> <li><input type="checkbox"/> Appeal Brief (in triplicate)</li> </ul>
<input type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <li><input type="checkbox"/> Preliminary</li> <li><input type="checkbox"/> After Final</li> <li><input type="checkbox"/> Affidavits/declaration(s)</li> <li><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]</li> </ul>	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <ul style="list-style-type: none"> <li><input type="checkbox"/> Power of Attorney</li> </ul>	<input type="checkbox"/> Status Inquiry <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Return Receipt Postcard</li> </ul>
<input type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8
<input type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <li><input type="checkbox"/> Form PTO-1449</li> <li><input type="checkbox"/> Copies of IDS Citations</li> </ul>	<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <ul style="list-style-type: none"> <li><input type="checkbox"/> Small Entity Statement</li> </ul>	<input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)</li> </ul>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD(s) for large table or computer program	<ul style="list-style-type: none"> <li><input type="checkbox"/> Check for \$1000.00 to cover Issue Fee and Publication Fee</li> <li><input type="checkbox"/> Part B – Fee(s) Transmittal (Form PTOL-85B)</li> <li><input type="checkbox"/> Copy of Part B – Fee(s) Transmittal</li> </ul>
<input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <li><input type="checkbox"/> Paper Copy/CD</li> <li><input type="checkbox"/> Computer Readable Copy</li> <li><input type="checkbox"/> Statement verifying identity of above</li> </ul>	<input type="checkbox"/> Amendment After Allowance <ul style="list-style-type: none"> <li><input type="checkbox"/> Request for Certificate of Correction               <ul style="list-style-type: none"> <li><input type="checkbox"/> Certificate of Correction (in duplicate)</li> </ul> </li> </ul>	

**CORRESPONDENCE ADDRESS**

Direct all correspondence to: Patent Administrator  
 Goodwin Procter LLP  
 Exchange Place  
 Boston, MA 02109  
 Tel. No.: (617) 570-1000  
 Fax No.: (617) 523-1231  
 Customer No. 051414

**SIGNATURE BLOCK**

Respectfully submitted,

William R. Haulbrook, Ph.D.  
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